

100

106

102

104

Travel Itinerary

Sort

Purpose:

Traveler:

Start Date:

End Date:

Appointment

Purpose:

Location:

Address Line 1:

Address Line 2:

City:

State/Province:

Postal Code:

Country/Region:

Additional Info:

Contacts

Name	Title	Company	Telephone

☒ Repeating Table

Notes:

Fig. 1

Travel Itinerary

Sort

Purpose:

Traveler:

Start Date: 03/13/2002

End Date:

Start Date:

Departure Date:

03/13/2002

Start Time:

Departure Time:

End Date:

Arrival Date:

03/14/2002

Appointment

Purpose:

Location:

Address Line 1:

Address Line 2:

City:

State/Province:

Postal Code:

Country/Region:

Additional Info:

Contacts

Name	Title	Company	Telephone

☒ Repeating Table

Notes:

travellitinerary

- generalTripInfo
 - startDate
 - startTime
 - endDate
 - endTime
 - purpose
 - traveler
 - travelPlanner
- events
 - event
 - startDate
 - startTime
 - endDate
 - endTime
 - appointment
 - comment
 - contacts
 - additionalInfo
 - purpose
 - location
 - telephoneNumber
 - faxNumber
 - address
 - accommodation
 - airTransport
 - groundTransport
 - comment

Fig. 2

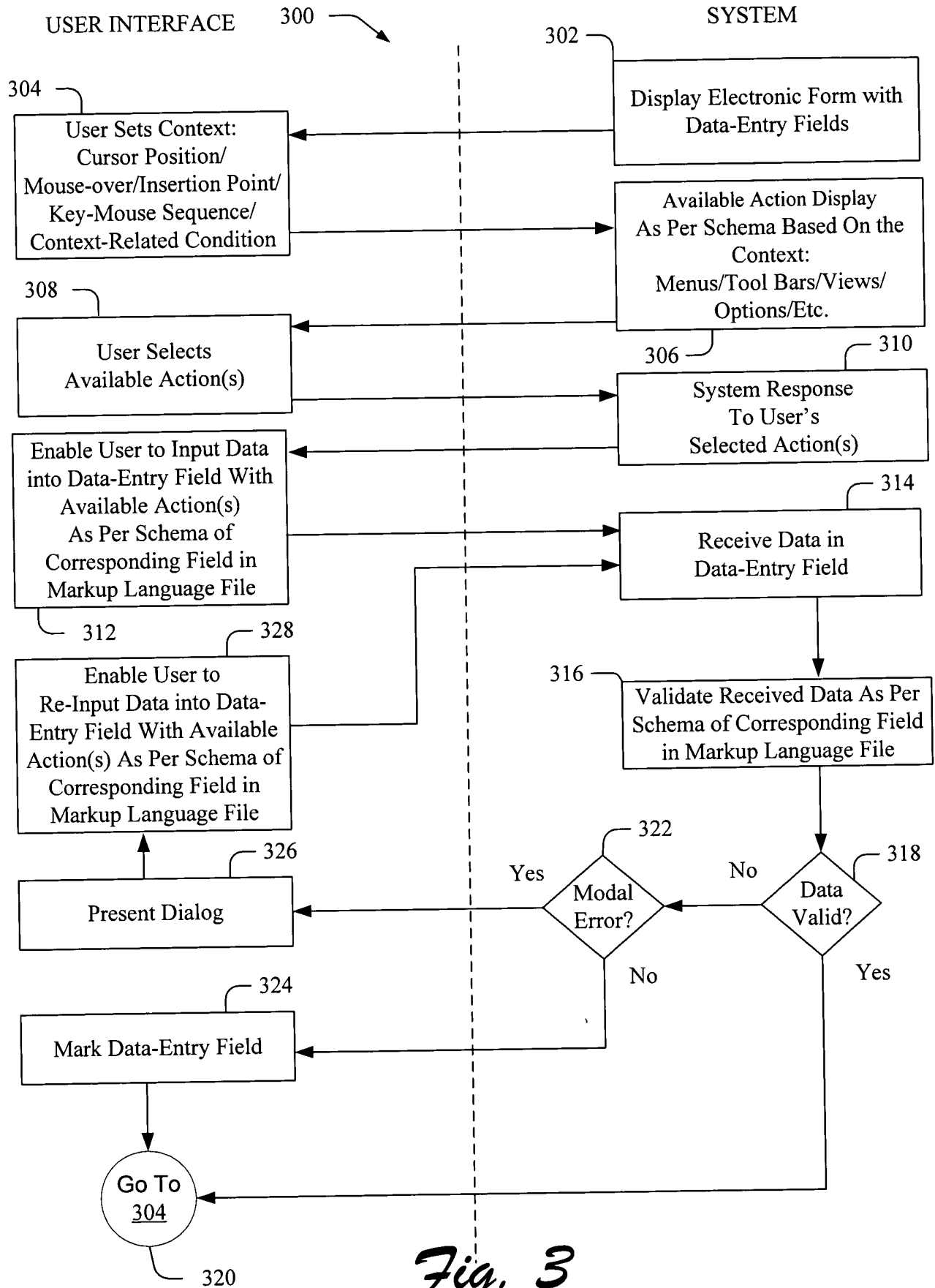


Fig. 3

410

Fig. 4

Form1 - Microsoft XDocs Enterprise Edition

File Edit View Insert Format Tools Table Help

Type a question for help

Expense Report

Report Date: 1/27/2003 Expense Code: Expense Period: 2/3/2003 to: Business Purpose:

Employee

Name: Address Line 1:
Title: Address Line 2:
Department: City:
ID Number: State/Province: Postal Code:
E-mail Address: Country/Region:

Manager

Name: E-mail Address:

Itemized Expenses

Currency: USD (\$)

Date	Description	Category	Cost (\$)
Subtotal			
Less cash advance			
Total expenses (\$)			

Notes

Signatures
Sign and print your name.

Microsoft XDocs

The Report Date Must Be Later Than the Expense Period

OK

Form template installed on this computer: um:schemas-microsoft-com:office:xdocs:ooib:ExpenseReportDomestic:1033

start | MSWeb Home Page | RE: MS1-1407US, 30... | Form1 - Microsoft X... | validation-pat-edit2... | 5:41 PM

Fig. 5a

Fig. 5b

Purchase Request

Request Number: Placement Date: 2/8/2002

Priority: Normal Date Required:

Submitted By:

Name, Full:

Employee ID:

Email:

Address:

City:

State: Postal Code:

Phone Number:

Deliver To: ☐ Same as Submitted By

Name, Full:

Employee ID:

Email:

US Address:

Street:

City:

State: Postal Code:

Suggested Supplier:

Company Name: Phone Number:

Fig. 6a

Purchas

Request Number: Placement Date: 2/8/2002

Priority: Normal Date Required:

Submitted By:

Name, Full:

Employee ID:

Email:

Address:

City:

State: Postal Code:

Phone Number:

Deliver To: ☐ Same as Submitted By

Name, Full:

Employee ID:

Email:

Suggested Supplier:

Company Name: Phone Number:

Fig. 6b

Purchase Request

Request Numbers: _____ Placement Dates: 2/8/2002

Priority: Normal Date Required: _____

Submitted By:

Name, Full: _____

Employee ID: _____

Email: _____

Address: _____

City: _____

State: _____ Postal Code: _____

Phone Number: _____

Deliver To: (☐ Same as Submitted By)

Name, Full: _____

Employee ID: _____

Email: _____

Address: _____

City: _____

State: _____ Postal Code: _____

Phone Number: _____

Suggested Supplier:

Company Name: _____

Phone Number: _____

702

Fig. 7a

Fig. 7b

Purchase Request

Request Numbers: _____ Placement Dates: 2/8/2002

Priority: Normal Date Required: _____

Submitted By:

Name, Full: _____

Employee ID: _____

Email: _____

Address: _____

City: _____

State: _____ Postal Code: _____

Phone Number: _____

Deliver To: (☐ Same as Submitted By)

Name, Full: _____

Employee ID: _____

Email: _____

Address: _____

City: _____

State: _____ Postal Code: _____

Phone Number: _____

Suggested Supplier:

Company Name: _____

Phone Number: _____

704

Fig. 8

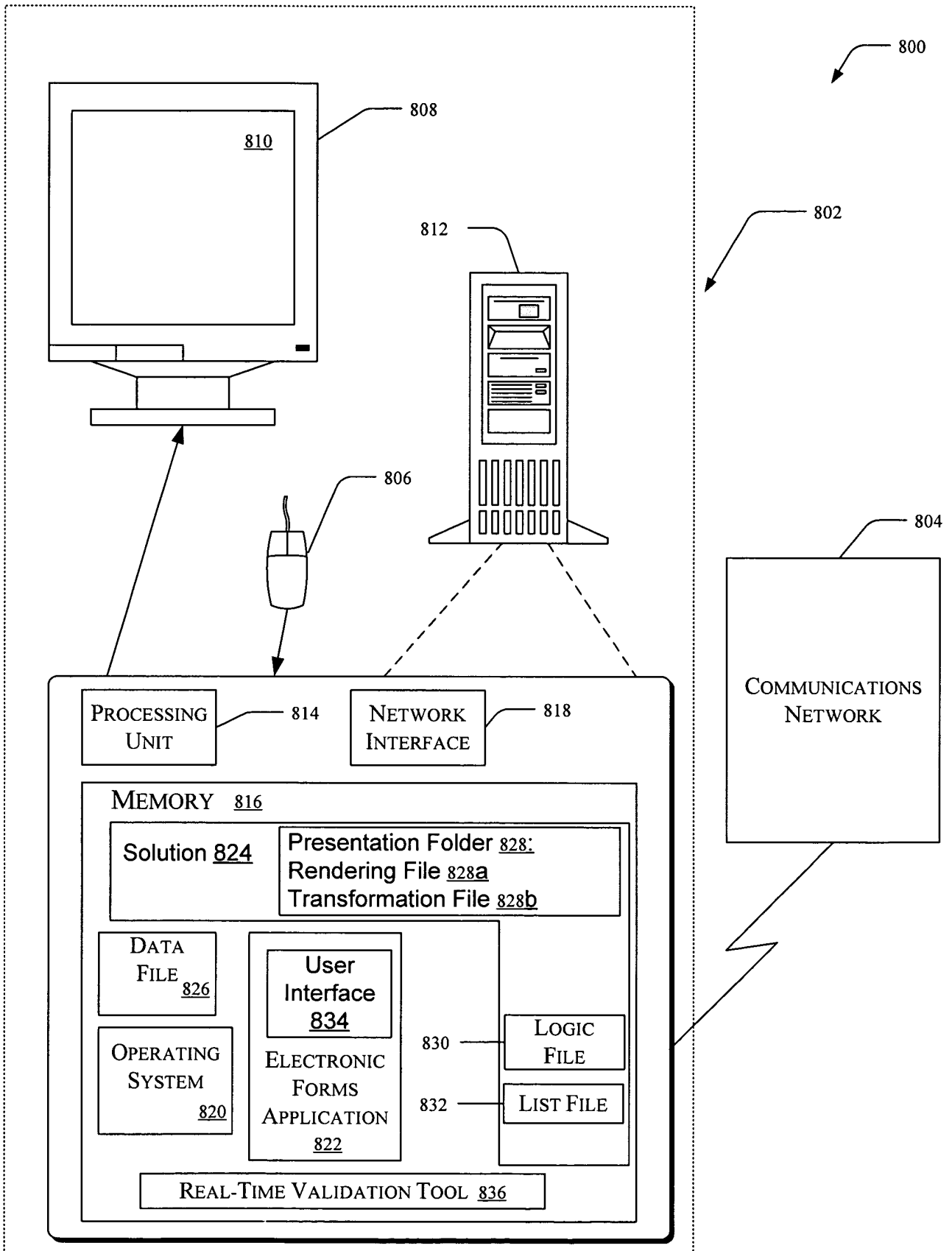
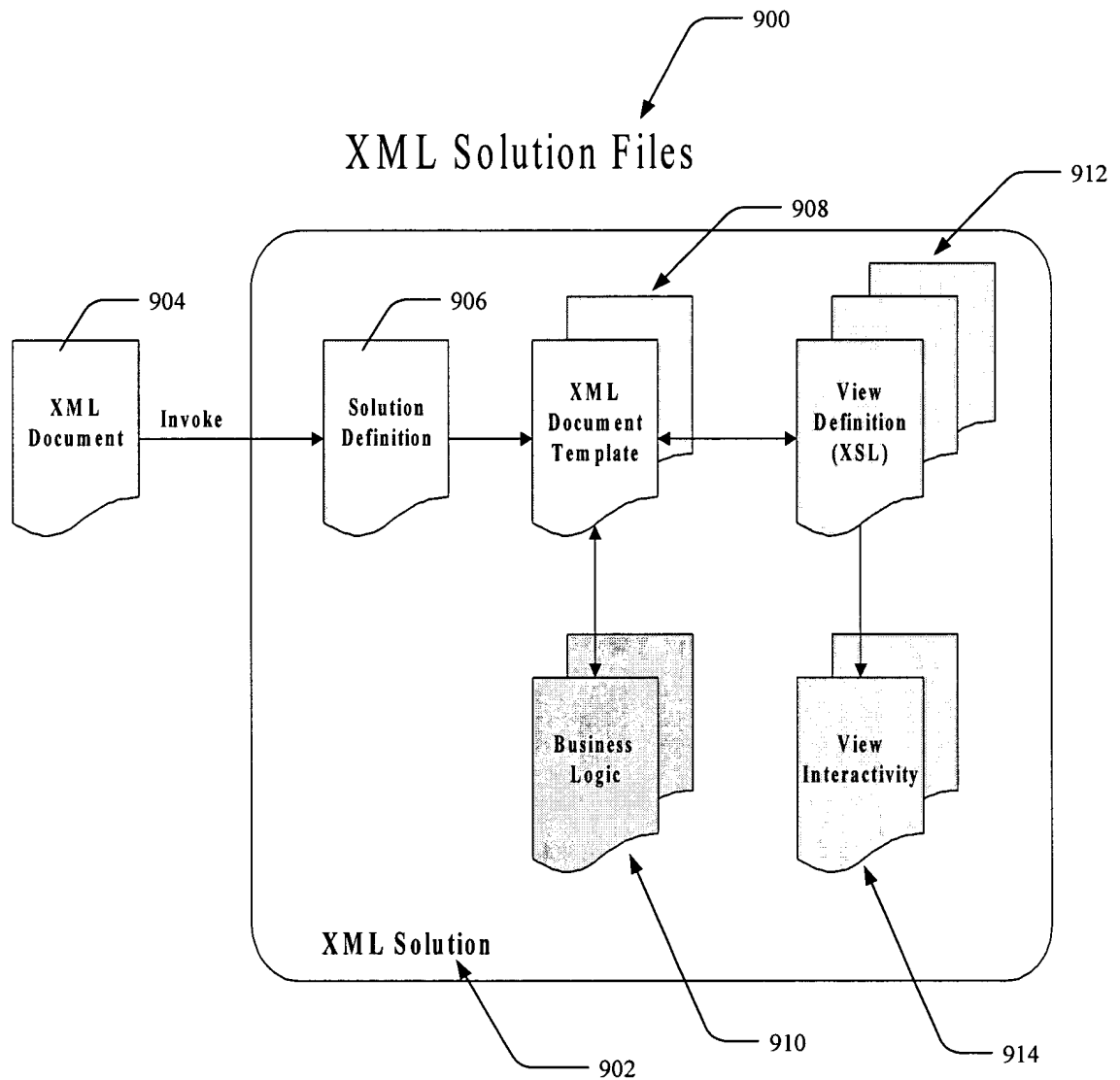
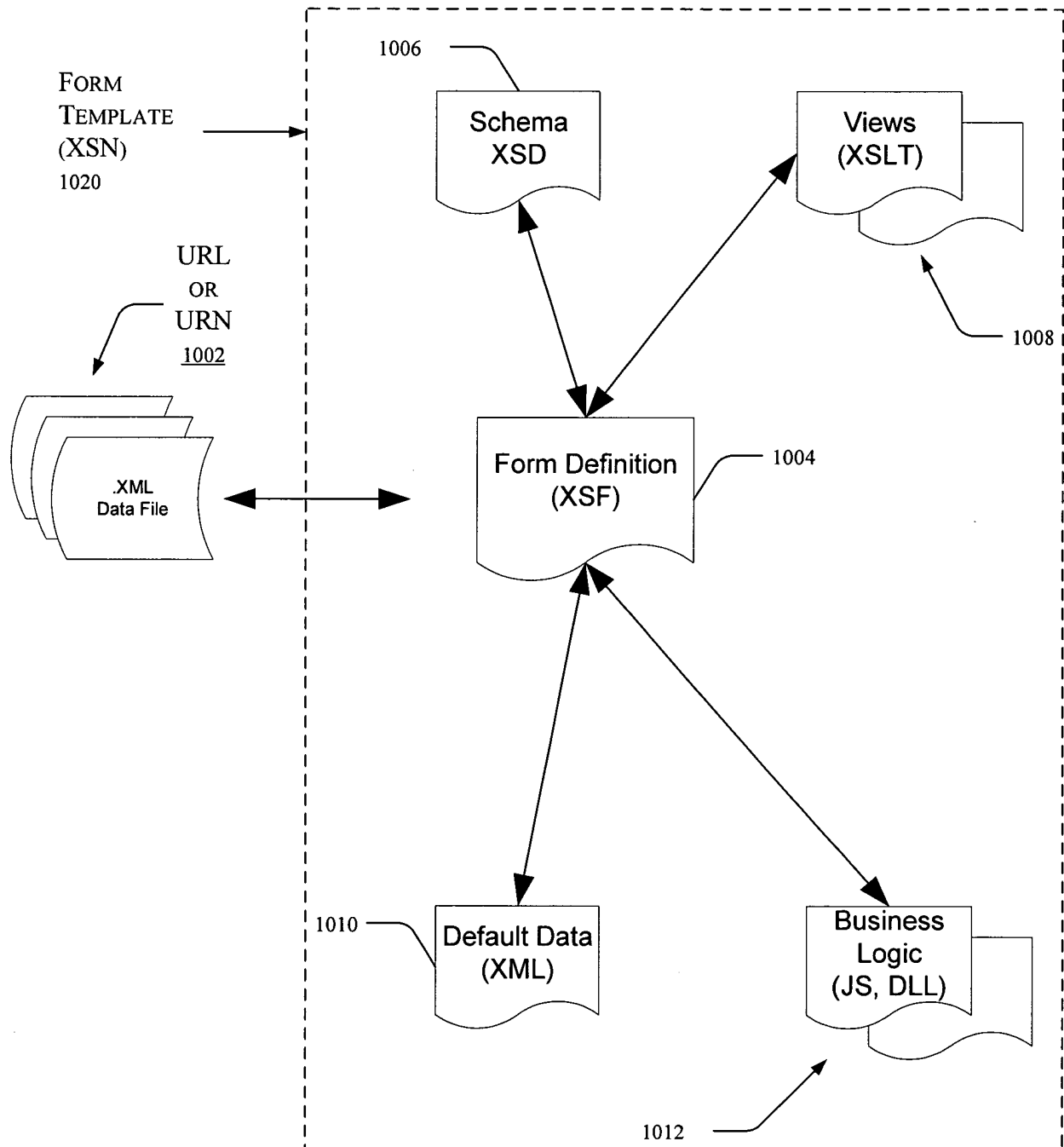


Fig. 9



1000

Fig. 10



1100

Fig. 11

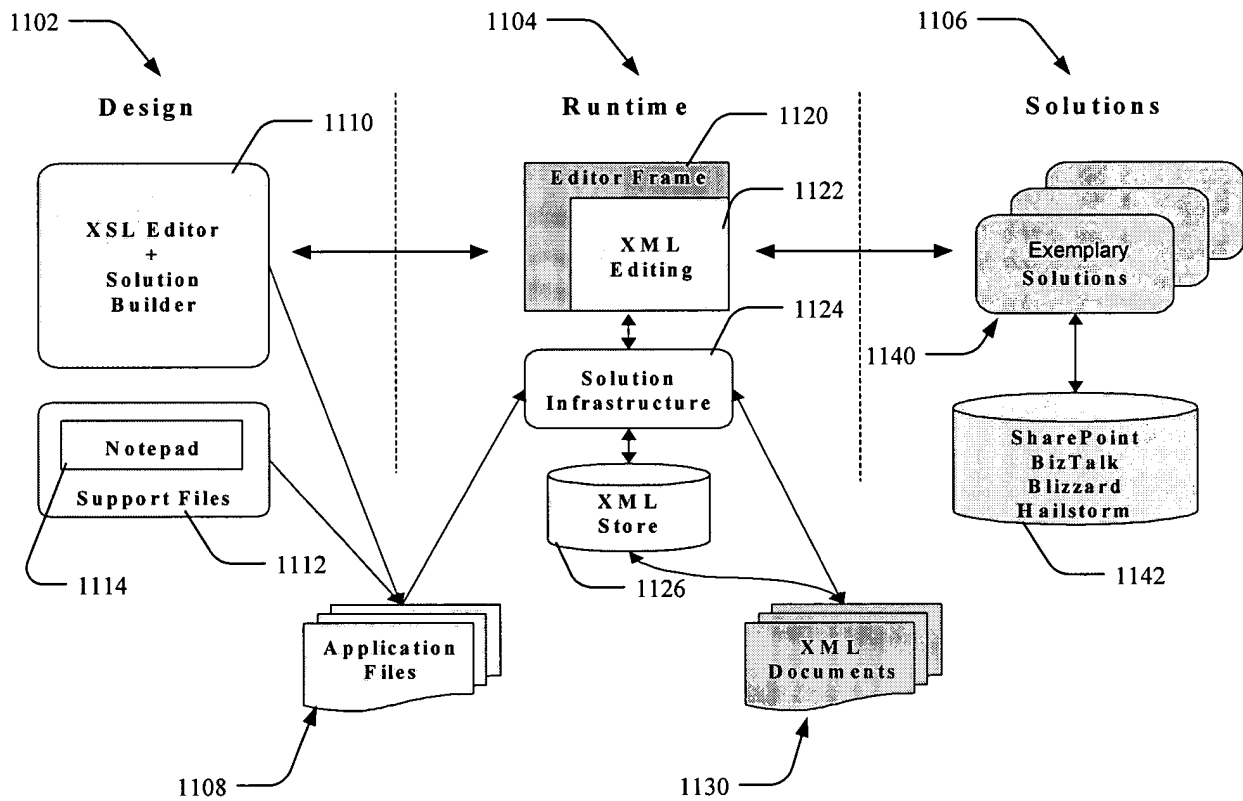


Fig. 12a

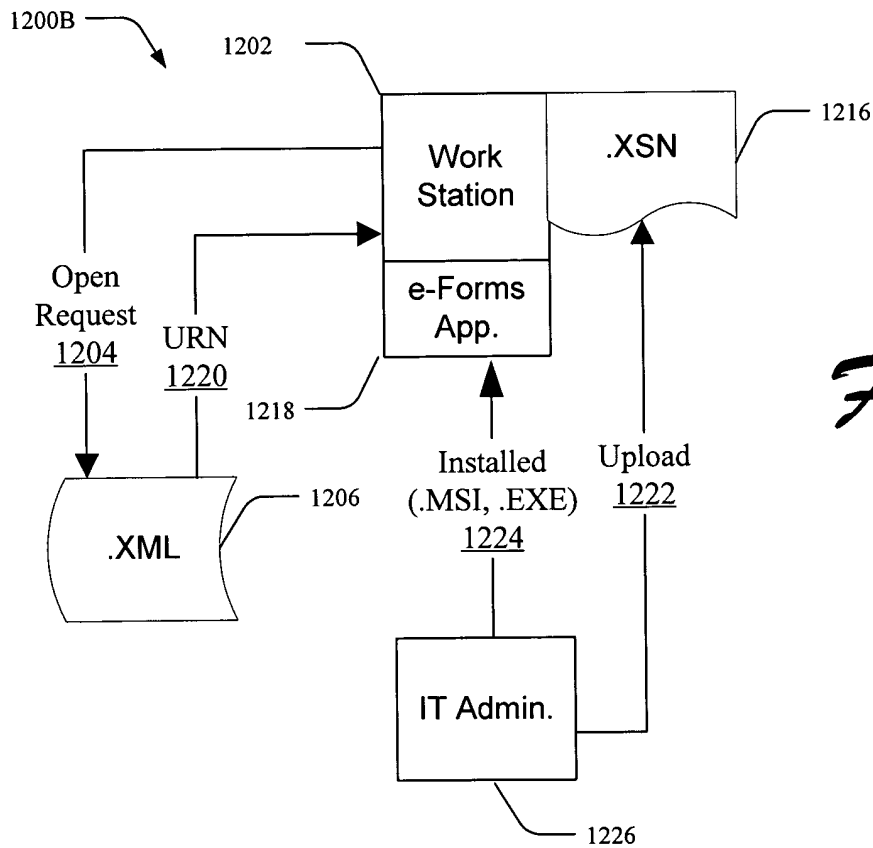
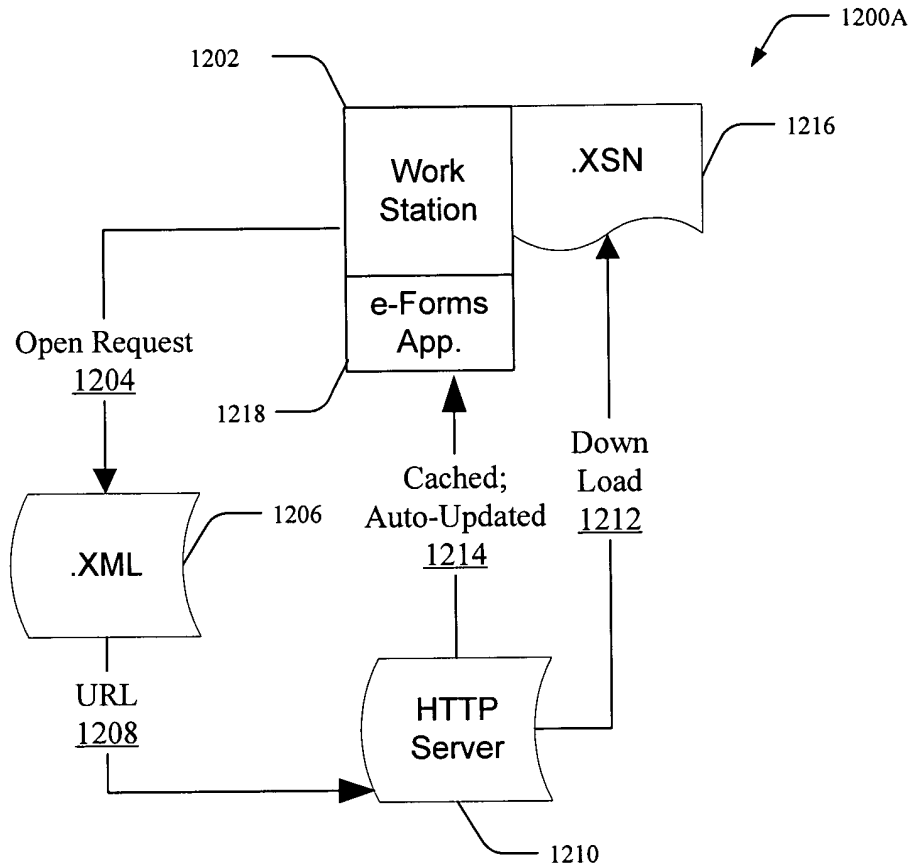


Fig. 12b

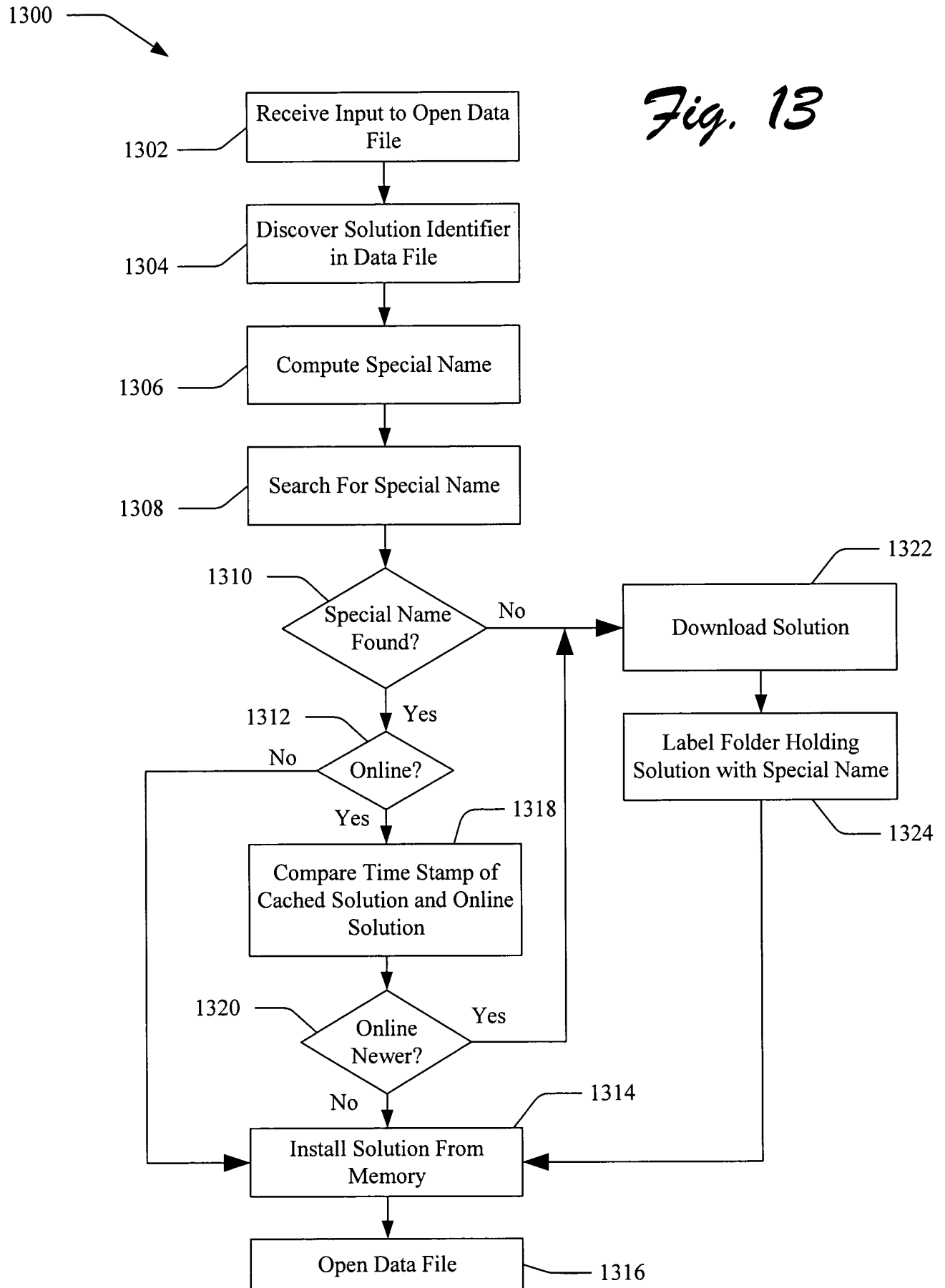


Fig. 14

